DATENT	ADDI	ICATION	FFF	DETERMINAT	ION	RECORD
PAICIVI	AFFL	-ICALIUN		CEIEDIVIIIAI	1011	HECCHE

Effective October 1, 2000

Application or Docket Number

09735193

						_			<u> </u>		100	
CLAIMS A			S FILED - PART I (Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS								RATE	FEE		RATE	FEE
FO	R		NUMBER F	ILED		ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			2 minus 20=		. 0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 = * (• 0		ł	X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM P			RESENT				+135=		1	+270=		
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	l	TOTAL	>+	OR	TOTAL	
-		LAIMS AS A						IOIAL	317	OR	OTHER	THAN
		(Column 1)		(Colur	mn 2)	(Column 3)	ı	SMALL	ENTITY	OR	SMALL	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X40=		OR	X80=	
Ĺ	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	ENDEN.	T CLAIM		 	+135=		OR	+270=	
							L	TOTAL ADDIT. FEE			TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)	,	I EE (•		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PREVI	1BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	**		=	[X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	F.O. ****	=		X40=		OR	X80=	
L	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	'ENDEN'	CLAIM		!	+135=		OR	+270=	
							ا	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)	1					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	1BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	,	RATE	ADDI- TIONAL FEE
MQ Q	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	 /
ME	Independent	*	Minus	***]=		X40=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					ı þ						
		mn 1 is less than t					L	+135= TOTAL		OR	+270= TOTAL	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Indonesial In the Appropriate box in column 1.											L